

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>45</i>	<i>11/20</i>
FORMALITY REVIEW	<i>RM</i>	<i>56864</i>	<i>1/2/01</i>
RESPONSE FORMALITY REVIEW	<i>RM</i>	<i>781</i>	<i>04-19-01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 Allowed I Interference
 (Through numeral) Canceled A Appeal
 Restricted O Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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